Limited Liability Company

Statement of Change

of

Known Place of Business, Statutory Agent, or Statutory Agent's Street Address

Change of Address of a Member or Manager

(A.R.S. §§ 29-605 and 29-605.01)

FILING FEE \$5.00 (A.R.S. § 29-851)

1.

It is important that the information you provide on this form be correct. To obtain the correct information about the Limited Liability Company's current known place of business and statutory agent, consult the Corporations Division's Record Section at (602) 542-3026 or the Division's website at www.cc.state.az.us/corp.

2.	The ACC file number is:		
3.	The current address of the I	LLC's known place of business on file with the	ACC is:
4.	The name and street addre	ss* of the current statutory agent on file with the	e ACC are:
5.	If the LLC was not organize of its organization or, if not	ed in Arizona, the address of the office required so required, of the principal office of the foreig	to be maintained in the state n LLC is:
6.	Is the known place of busin	ess in Arizona to be changed?	
·.		e address of the new place of business is:	

LL:0006 Rev. 9/04

^{*} street address must be a physical address. P.O. box addresses will not be accepted

LLC Name	ACC File Number
7. Is the statutory agent to be changed?	
No. Yes, and the name and	d street address* of the new statutory agent are:
	utory agent to be changed? ddress* of the current statutory agent is:
	t has given the LLC written notice of this change.
	LC's members or managers to be changed?
☐ No. ☐ Yes. If you checked "	'yes", you must complete the following information for each ager whose address is to be changed:
Name:	, Member or Manager
Current Address:	(circle one) New Address:
Name:	(circle one)
Current Address:	New Address:
Name:	, <u>Member or Manager</u> (circle one)
Current Address:	New

st street address must be a physical address. P.O. box addresses will not be accepted.

LLC Name		ACC File Number
A.R.S §§ 29-605and 29-605.01 member/manager of the LLC.	require that changes to lim	ited liability companies be executed by a
DATED this day of		
	Name of LLC	
	Ву	
	Print Name	Title
	Statutory Agent (must sig	gn only if agent is changing address)
	Acceptance of Ap By Statutory ired only if a new statutory	Agent agent is being appointed)
The undersigned hereby acl named limited liability compan	knowledges and accepts the y effective this day	appointment as statutory agent of the above-of
	Signature:	
	Printed Name:	